PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number 10615549 20030048-1

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
			(Column 1)		(Column 2)		TYI	PE 🗀		OR	SMALL	ENTITY
TOTAL CLAIMS			25	·				RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	375.00	OЯ	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			25 minus 20= * 5				>	(\$ 9=		OR	.X\$18≟	90
INDEPENDENT CLAIMS			5. mir	nus 3 =		7	X42=		ÖR	X84=	168	
MULTIPLE DEPENDENT CLAIM P			RESENT					140⇒			+280=	
** If the difference in column 1 is less than zero, enter "0" in column 2							OTAL		OR	TOTAL	1 00 P	
CLAIMS AS AMENDED - PART II								OIAE	i škadini Vijeto	OR	OTHER	1008
(Column 1)			(Column 2) (Colum				S	MALL	ENTITY	OR	SMALL	Marie Comment of the comment
ENTA		CLAIMS REMÀINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI TIONAL FEE
AMENDMENT	Total	· 25	Minus	** 2	<u>5</u>	=	>	(\$.9= ·	1988	ÓР	X\$18=	
ME	Independent	· 5	Minus	***	5		7	(42≡		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							140		4	+280=	
					·		Ľ	140=		OR"	TOTAL	<u> </u>
							ADD	OIT. FEE		OR	ADDIT FEE	3
		(Column 1) CLAIMS	ļ	(Colur		(Column 3)	_	<u> </u>		k 154		
ENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FÉE	3	RATE	ADDI- TIONAL FEE
MENDMENT	Total	*	Minus	**		<u>,</u> =) ×	(\$ 9=	. : ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	OR	X\$18=	
AME	Independent	*	Minus	***		=	5	(42=		ОR	X84= i	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDENT	CLAIM		╵├╴	140=			+280=	
		٠					L	TOTAL	20/4/9 (1	OR	TOTAL	
:							ADD	OIT. FEE	3 - (2 - 10 - 10) 3 - 10 - 10	OR	ADDIT FEE	3 35 g
_	<u> </u>	(Column 1) CLAIMS		(Colur		(Column 3)		1, 11, 11	A TANK			الله م
AMENDMENT C		REMAINING AFTER AMENDMENT	1	NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RAŢĒ	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X	(\$ 9≟		OR	X\$18=	
ME	Independent	*	Minus	***		=	,	(42=	AMERICAN AND AND AND AND AND AND AND AND AND A	ÓR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								140= TOTAL		OR	+280=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								·	OR.	TOTAL ADDIT, FEE	
		nber Previously Pa					er found	in the app	propriate box	k in co	lumn 1.	